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Bib Data Sheet

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APPLICANTS

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** CONTINUING DATA ***** *OK*

me This application is a CON of 09/106,377 06/29/1998 PAT 6,001,634
which is a DIV of 08/252,508 06/01/1994 PAT 5,854,037
which is a CIP of 08/190,698 02/01/1994 ABN
which is a CON of 07/925,061 08/04/1992 ABN
which is a DIV of 07/527,237 05/22/1990 PAT 5,166,057

** FOREIGN APPLICATIONS ***** *None*

me IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 26	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials			

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TITLE
RECOMBINANT NEGATIVE STRAND RNA VIRUS EXPRESSION SYSTEMS AND VACCINES

FILING FEE RECEIVED 1298	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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